DOCUMENT RESUME

ED 438 296 TM 030 604

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TITLE A Standardised Method for Investigating Learning in Music Therapy. Occasional Paper Number 11.

PUB DATE 1999-12-00

NOTE 27p.; Version of a paper presented at the Professional Development Seminar of the Australian Music Therapy Association (Sydney, New South Wales, Australia, August 1999). For preliminary data on the effect of students' knowledge, interest, and strategies using the model of domain learning, see ED 434 908.

PUB TYPE Reports - Descriptive (141) -- Speeches/Meeting Papers (150) -- Tests/Questionnaires (160)

EDRS PRICE MF01/PC02 Plus Postage.

DESCRIPTORS *Educational Assessment; *Graduate Students; Graduate Study; Higher Education; Knowledge Level; *Learning; *Music Therapy; Recall (Psychology); Student Attitudes; *Test Construction; *Therapists

IDENTIFIERS *Domain Knowledge

ABSTRACT

This paper outlines a method for professional assessment of music therapy students' learning and recall. The purpose of the assessment is to examine the Model of Domain Learning (P. Alexander, 1997) within an Australian context and to provide a professional assessment for application within music therapy education. Despite the music therapy specific content, the assessment is applicable to students of other disciplines. It is also applicable to students for the purpose of investigating learning in terms of subject domain, recall, and interests. The assessment examines learners' individual recall abilities against their strategy use and interests. Within the Model of Domain Learning, three longer-term experience-based states are proposed: acclimation, competence, and expertise. Each of these stages is further divided into short-term stages. The assessment contains a domain knowledge test based on the music therapy postgraduate class, an individual interest measure, and a recall test. The assessment used in the study is attached. (Contains 12 references.) (SLD)

OCCASIONAL PAPER
Number 11

A STANDARDISED METHOD FOR INVESTIGATING LEARNING IN MUSIC THERAPY

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December 1999

A STANDARDISED METHOD FOR INVESTIGATING LEARNING IN MUSIC THERAPY

This manual outlines a method for professional assessment of music therapy students' learning and recall. The purpose of this assessment is twofold: (i) to examine the Model of Domain Learning within an Australian context therefore increasing our understanding of the model, and (ii) to provide a professional assessment for application within music therapy education. Despite the music therapy specific content the assessment is applicable to students of other disciplines. It examines learners' individual recall abilities against their strategy use and interests. It is also applicable to students from other disciplines for the purpose of investigating students' learning in terms of subject domain, recall and interests.

The assessment is based on the Model of Domain Learning as documented by Alexander (1997). Alexander applied the model using content from psychology and sciences, but in this assessment it has been redesigned for the music therapy context with the aim of providing to study the learning processes of music therapy students.

Overview of a model of domain learning

The model of domain learning proposed by Alexander (1997) sought to describe some of the factors that have an impact upon learning in a domain or field of study (i.e. academic subject area). A domain encompasses the knowledge, skills and attitudes that need to be taught specifically and that would normally be expected to lie outside the normal range of everyday experiences. [1]

Within the model of domain learning three longer-term experience-based stages (see Figure 1) are proposed – acclimation, competence and expertise – and within each of these stages there are shorter-term phases, almost like epicycles. The stages are progressive and incremental. Once a learner has progressed to a higher stage, it is considered unlikely that he/she will return to an earlier stage of development.

[1] An earlier version of this paper was presented at the Professional Development Seminar, Australian Music Therapy Association, Sydney, August 1999.

Stages of domain learning

These stages are reminiscent of other models of expertise, such as those of Berliner, as well as the much earlier models of skill learning proposed by Fitts (Berliner 1988, Fitts 1968). The Model of Domain Learning is directed towards the relatively short time periods that are a feature of much academic learning and which may not be adequately explained by other theories of learning, such as Piaget. Our concern is with the acclimation stage of academic learning.

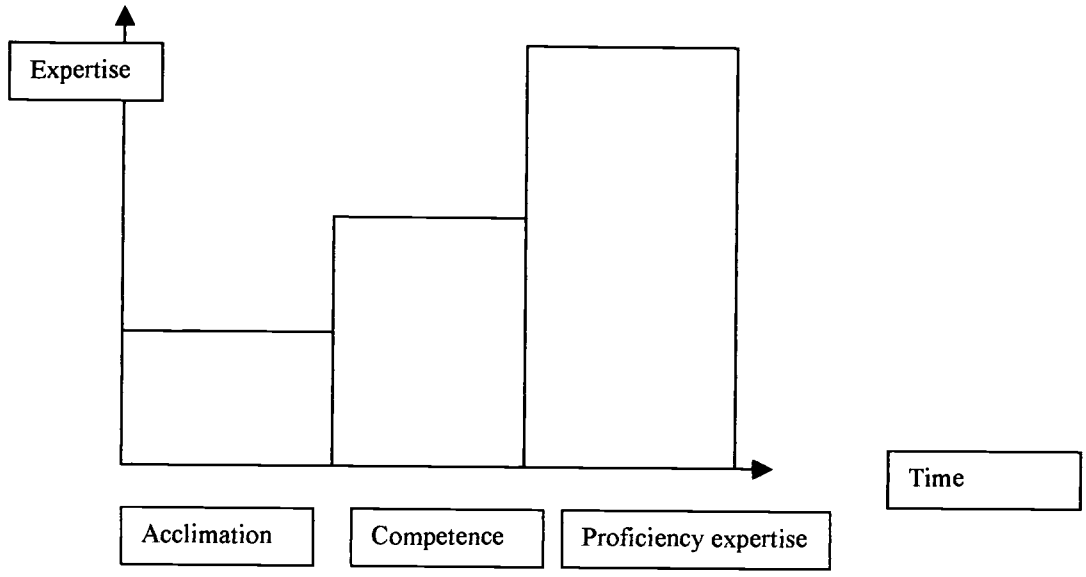

Figure 1. Stages in the development of domain learning

In the acclimation stage, the learner is building familiarity with the domain by putting together a network of facts and ideas. As a consequence, the learner is required to determine the relevance of new information and this may or may not be done correctly. For example, they may rely on limited heuristic devices for their strategies. It is also possible that learning is influenced by extrinsic motivation or task achievement factors.

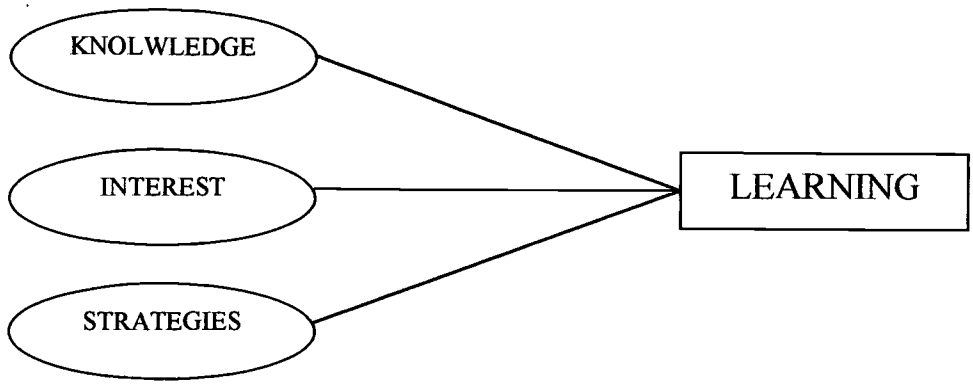

Figure 2. A model of the forces operating in domain learning

Primary forces in domain learning

A second aspect of the Model of Domain Learning that takes it well beyond the stage theories of learning is its proposal that three primary forces – knowledge, interest and strategic processing – interact with the three stages of learning. The aspects of these forces are described in Table 1 and a tentative arrangement illustrated in Figure 2. For instance the Model of Domain Learning recognized that learning was related to corresponding shifts in a learner's interest and that individual interest would rise as individuals become more knowledgeable in a domain (see Alexander, Murphy, Woods, Duhon & Parker, 1997, p.121). The Model of Domain Learning purports to define growth in domain learning by the measurement of the changing components of the learner's knowledge, interest and strategic processing.

PRIMARY FORCE	COMPONENTS
SUBJECT MATTER KNOWLEDGE	• Domain Knowledge (e.g., declarative, procedural and conditional knowledge) • Topic Knowledge (e.g., subject specific concepts)
INTEREST	• Individual interest (e.g., personal interest) • Situational interest (e.g., temporary interestingness)
STRATEGIC KNOWLEDGE	• General cognitive strategies (e.g., notetaking, re-reading) • Metacognitive strategies (e.g., self-assessment of learning) • Self - regulatory processes (e.g., purposeful procedures to increase performance)

Table 1. Primary forces in the stages of domain learning

Subject-matter knowledge is described as the knowledge an individual possesses relative to a particular area of study (e.g., music) and comprises domain knowledge and topic knowledge (Alexander, Jetton, & Kulikowich, 1995). Domain knowledge is the subject-specific knowledge whereas topic knowledge is defined as the awareness of a sub-set of ideas. Alexander, Kulikowich and Schulze (1994) tested the influence of subject matter knowledge on the level of comprehension of a personally involving passage dealing with Stephen Hawking and Grand Unification Theory and found that topic knowledge, domain knowledge and interest were significant predictors of understanding. For an obstruseabstruse technical passage on truth quarks, only domain knowledge and interest were significant predictors for college students. Domain knowledge of music therapy was the area assessed in this study.

The concept of learner interest also features in two forms within the Model of Domain Learning, as individual and situational interest. Individual interest has been described as a long-term relationship with the subject or involvement in a topic area, whereas situational interest represents the transitory arousal or attention from the

immediate context (Hidi, 1990). The link between familiarity and interest in a subject and their positive effects on learning have been noted elsewhere. For instance, Alexander, Jetton & Kulikowich (1994, p.564) reported correlations of 0.45 between interest in viral Nucleic acids and recall and 0.63 for interest in Bacteriophage and recall for 30 premedical and 17 educational psychology graduate students. The interest assessed in this study was the level of individual interest in music therapy. Strategic knowledge considers how the ways in which people overcome their lack of understanding or the problems they face in learning. It includes general strategies such as summarizing, or self-checks on accuracy and the observation of one's learning (see Garner & Alexander, 1989). For the purposes of this study the strategic processing concepts related to how people overcame the need to recall aspects of a video presentation. The Model of Domain Learning presumes a decrease in the role that general strategies play in academic performance, due to the increase in significance of the students' domain knowledge and therefore less dependence on learning strategies. This is illustrated in the study be Alexander et al. (1997) which explored changes in knowledge, interest and strategy use following formal instruction. They used 329 college students enrolled in an introductory educational psychology class. The correlation between domain knowledge and strategy use declined from 0.32 prior to instruction to 0.15 following instruction (p.141).

Music Therapy Assessment

An assessment method has been adapted for the Australian educational context most particularly in music therapy, it has also been applied to students other than music therapy as part of a broader research project. The assessment has been applied to music therapy students, Conservatorium music students including: performing, composition, and educational majors; dance therapy students, counseling students, masters education students, art therapy students and students studying expressive therapies at post graduate level.

The aim in developing this assessment method was to investigate the factors affecting learning in a specific subject domain in the light of recent research that has challenged the view that academic learning can be reduced to a logical or rational activity for analysis. The questions that may be answered using this assessment method are:

- What is the explicit nature of the benefits of formal instruction in terms of the knowledge gained, the interest and the strategies identified by students?
- How much knowledge do students gain in relation to the specific subject domain under study?
- Are the interests of the students affected by their study?
- How are students' strategic behaviours influenced by their learning and exposure to the study topic?

The assessment method has been specifically targeted at post graduate university students at two stages in training, therefore providing similar insight into the influences on knowledge, interest and strategic behaviours as affected by specific subject domain learning over two time intervals.

The following section outlines the assessment procedure including examples. It includes guidelines and suggestions for use, and all materials are included in this manual. The assessment comprises four components, subject content (domain knowledge), interest, recall and learning strategies.

THE PROFESSIONAL ASSESSMENT OF MUSIC THERAPY STUDENTS' LEARNING & RECALL

Domain knowledge test

The content was based on the subject Music Skills 1 which is a subject of the music therapy postgraduate course. The content related to theoretical music and music therapy knowledge with the theme of childrens' music. The test comprised 30 true /false questions and short answer questions (see Appendix A). An example of the test is illustrated in Figure 3.

Administration. Participants should be given an overview of the four components of the assessment and be encouraged to ask questions. Participants should be encouraged to complete all questions, emphasis should be placed on the comparative purpose of the assessment between its components and especially to cohorts from other disciplines rather than on a success or failure based on knowledge. Participants are given the opportunity to complete the assessment at their own pace. The short

answer questions should not require any special directions apart from participants being asked to briefly note their ideas and suggestions.

Scoring. One mark is given for each acceptable piece of information for each of the 10 points. Suggestions on a range of acceptable answers are provided with the complete assessment copy. Scoring is 1 mark/correct answer. An answer sheet is included in the test.

Figure 3 Extract from true/false questions from knowledge test

Sample from:
TRUE/FALSE questions requiring responses to the following statements:

- Improvisation is contra-indicated for children with cerebral palsy.
- Developing a broad definition of music is essential to the music therapist.
- The name synonymous with analytic music therapy is Juliet Alvin.

SHORT ANSWER QUESTIONS
Answer the following questions regarding the child as described below:
The Nursing Unit Manager of a childrens' ward has asked you to visit a child who is refusing to eat. The child is 4 years of age, is mildly developmentally delayed and is receiving treatment for a broken leg. The child is responding to all medical and non-medical interventions with extreme withdrawal.

1 Identify 3 needs for the child:
2 Identify 3 therapeutic aims for the child:
3 List 4 interventions by the therapist that address these needs and aims:

The true/false and the short answer components together showed high internal consistency, and therefore proved to be highly reliable as instruments. The coefficient alpha for the 30-item domain knowledge test was 0.92.

Individual interest measure

In order to measure the individual interest in concepts relating to the domain of music therapy, an interest scale was developed. The interest concepts are again based on Music Skills 1 subject content, and are scored on a scale from not very interested at (1) to very interested at (10). There are 26 items. There was also an option to mark 'uncertain of the meaning' for each concept item. An extract of the interest inventory is shown in Figure 4 (see Appendix B). The internal consistency of the interest questionnaire was 0.90.

Administration. Participants are asked simply to rate their individual interests.

Scoring. Each of the 26 interest components is given a numerical value of 1 to 10.

Recall Test

Included in the battery of measures completed by the students was a recall task. This recall task was chosen against the background of the Model of Domain Learning, which nominates the significant role of subject matter, interests, and general strategies in academic performance. The amount that students would recall from the excerpt of the domain-related music therapy session was anticipated to be a reflection of their knowledge, interests, and strategies.

The recall task used a three-minute excerpt from *Music Therapy a Sound Practice* Faculty of Music, University of Melbourne and the Australian Music Therapy Association (1991). The excerpt features a discussion and voice over by an experienced music therapist working with a group of young adult clients with a range of conditions in an acute psychiatric ward. Clients are shown engaging with each other and their therapist in both verbal and musical exchanges. The musical interaction is based on improvisation which facilitates a particular freedom of expression and encourages clients to be creative and to explore their communication needs without compulsion. The clients are articulate and are depicted describing their experience within the music e.g. "the music was suitable".

Administration. The recall task had two stages. Participants are shown the video excerpt with no indication that they are required to complete a recall task. The video is shown as an example of music therapy in action. At the conclusion of viewing participants are given a blank sheet to list any and all that they can recall in relation to the video. The students were then asked to make notes on all that they could recall. One-week later participants are again given a blank sheet with no forewarning and asked to note all that they recall from the video excerpt.

Figure 4 Extract from Interest Inventory

SAMPLE INTERESTS

Place an 'x' in the space that best indicates your interest in the following concepts:

1	improvisation	|__|__|__|__|__|__|__|__|__|__|__|__|__| not very interested very interested __uncertain of meaning of concept
2	melody	|__|__|__|__|__|__|__|__|__|__|__|__|__| not very interested very interested __uncertain of meaning of concept
3	rhythm	|__|__|__|__|__|__|__|__|__|__|__|__|__| not very interested very interested __uncertain of meaning of concept
4	children's music	|__|__|__|__|__|__|__|__|__|__|__|__|__| not very interested very interested __uncertain of meaning of concept
5	voice work	|__|__|__|__|__|__|__|__|__|__|__|__|__| not very interested very interested __uncertain of meaning of concept
6	composition	|__|__|__|__|__|__|__|__|__|__|__|__|__| not very interested very interested __uncertain of meaning of concept
7	therapeutic style	|__|__|__|__|__|__|__|__|__|__|__|__|__| not very interested very interested __uncertain of meaning of concept
8	musical games	|__|__|__|__|__|__|__|__|__|__|__|__|__| not very interested very interested __uncertain of meaning of concept

Scoring. The tasks were scored by tallying each event, or observation recalled. Marks were not given for comments or views, or related information given by participants. The scoring was validated by an alternative marker.

Strategic processing

In conjunction with the second recall task, students are asked to indicate the strategies that they employed in completing the task. A strategy inventory was produced directly relating to the video excerpt. It provides a selection of 20 possible strategies that may have been used in the recall task (see Figure 5 and Appendix C).

Administration. Participants are asked to indicate the strategies that they are aware of using in their recall task. The strategic processing component is completed at the same time as the second recall task, (i.e. one week later than Recall 1).

Figure 5 Extract of Strategic Processing

Choose any strategy that you used in order to complete the recall task, i.e. the video example, according to its usefulness for you. Place a cross (x) next to those strategies that you found *most* useful. For example if you used the musical element of rhythm to assist your recall place an 'x' beside it.

Possible strategies that you used in your recall (video) task:

1_____comparison of yourself to the music therapist
2_____comparison to other music therapy approaches
3_____judgement of music therapy activity as an appropriate intervention
4_____evaluation of music to facilitate therapy
5_____analysis of music therapy method
6_____remembering colours
7_____looking for movement/s
8_____remembering visual shape/structure of room, seating plan etc.
9_____identifying instruments

PRELIMINARY RESULTS & FUTURE DIRECTIONS

Some preliminary results from an administration of the knowledge, interest, strategy and recall tasks are summarized for a group of 17 music therapy students in Table 1. This assessment method has also been tried across a range of disciplines such as

music, art and, dance therapy, and counseling. It can be used to add to the knowledge regarding music therapy learning education. There are also the potential implications for music therapy curriculum development. For example the indications at present suggest that music therapy students even in their second year of learning are at an early stage of development in their overall music therapy education. Perhaps this is an idea that may support greater supervision options for practicing music therapists following training. (Langan 1999). The application of the assessment method follows a summative analysis of the previously analysed students across different subject areas. We welcome the application of the assessment method by other professionals and researchers.

Acknowledgements
The cooperation of Prof Alexander, University of Maryland, in making available sample questionnaires and her assistance are gratefully acknowledged. Preparation of this manual was supported by a postgraduate research grant from the University of Technology, Sydney to the first author.

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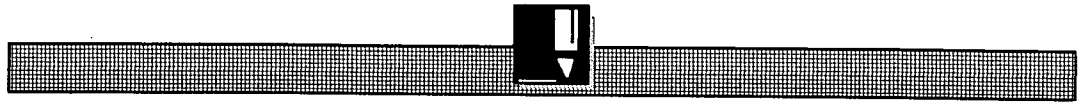
APPENDIX

Table 1 Preliminary results from an administration of the knowledge, interest, strategy and recall tasks

Variable	Mean	Std Deviation	Minimum	Maximum
Recall 1	16.5	4.6	8	26
Recall 2	10.6	4.8	5	22
Knowledge	2.5	3.5	19	30
Interest	191.4	27.4	158	247
Strategies	7.4	4.1	0	14

MUSIC SKILLS PILOT TEST 1



Instructor: Dr Jim Athanasou
& Dianne Langan

Name:_____
Course:_____
Date:_____

Read the following statements carefully and write true or false on the line provided beside each question. There are 30 true or false statements. Answer each question. If you are not sure then feel free to guess as marks are not deducted for wrong answers. There is no time limit but work as quickly as you can.

CHILDREN'S MUSIC

Typical children's music features:

1. _____ simple forms
2. _____ Neapolitan 6th's
3. _____ extended vocal ranges
4. _____ symmetrical phrasing
5. _____ extensive syncopation
6. _____ repetition
7. _____ chords: I, III, IV, & V
8. _____ reliable pulse
9. _____ embellished melodic lines
10. _____complicated supporting accompaniments

Read the statements carefully and write true or false beside each statement.

11_____ Kodaly Music Education was developed in the United States.

12. _____ Dalcroze Eurhythmics relies extensively on the written score.

13. _____ Orff Schulwerk uses improvisation.

14. _____ Play therapy is used by primary teachers to teach concepts of morality.

15. _____ Improvisation is contra-indicated for children with cerebral palsy.

16. _____ Transposing music from F# minor to Bb minor is an interval of a diminished 4th.

17. _____ An ostinato is not commonly used in childrens' music.

18. _____ A vocal line containing less than 5 notes is beneficial for children with Downs Syndrome.

19. _____ A melody line containing A, G, F#, G & D is best harmonised using A7.

20. Developing a vocal line requires modulation.

Read the statements carefully and write true or false beside each statement.

21_____ A therapist should establish the goals for a child before establishing needs of the child.

22_____ Children with no verbal language should not be given vocal material.

23_____ Creative Music Therapy incorporates evaluation scales using rhythmic and music response analysis.

24_____ The name synonomous with analytic music therapy is Juliett Alvin.

25. _____ The outcome of the therapeutic process should be known for the child before embarking on any intervention.

26_____ Reflecting a childs' music is most appropriate for children functioning at higher than moderate learning difficulties.

27_____ Music therapists are not able to work in government special schools.

28_____ Juliett Alvin originated a comprehensive approach to music therapy which employed "free improvisation".

29_____ The recorder is best avoided in therapy due to issues of hygiene.

30 ___ Developing a broad definition of music is essential to the music therapist.

SHORT ANSWER QUESTIONS

Answer the following questions regarding the child as described below:

The Nursing Unit Manager of a childrens' ward has asked you to visit a child who is refusing to eat. The child is 4 years of age, is mildly developmentally delayed and is receiving treatment for a broken leg. The child is responding to all medical and non-medical interventions with extreme withdrawal.

1 Identify 3 needs for the child:

i _____

_____

ii _____

_____

iii _____

_____

2 Identify 3 therapeutic aims for the child:

i _____

_____

ii _____

_____

iii _____

_____

3 List 4 interventions by the therapist that address these needs and aims:

i _____

_____

ii _____

_____

iii _____

_____

iv _____

_____

INTERESTS

Place an 'x' in the space that best indicates your interest in the following concepts:

1 improvisation

not very interested very interested
__uncertain of meaning of concept

2 melody

not very interested very interested
__uncertain of meaning of concept

3 rhythm

not very interested very interested
__uncertain of meaning of concept

4 childrens' music

not very interested very interested
___uncertain of meaning of concept

5 voice work

not very interested very interested
__uncertain of meaning of concept

6 composition

not very interested very interested
__uncertain of meaning of concept

7 therapeutic style

not very interested very interested
__uncertain of meaning of concept

8 musical games

not very interested very interested
__uncertain of meaning of concept

9 individual therapy

not very interested very interested
___uncertain of meaning of concept

10 group therapy

not very interested very interested
___uncertain of meaning of concept

INTERESTS

11 harmony

1 1 1 1 1 1 1 1 1 1 1
not very interested very interested

__uncertain of meaning of concept

12 musical form

1 1 1 1 1 1 1 1 1 1 1
not very interested very interested

__uncertain of meaning of concept

13 musical memory

1 1 1 1 1 1 1 1 1 1 1
not very interested very interested

__uncertain of meaning of concept

14 transposition

1 1 1 1 1 1 1 1 1 1 1
not very interested very interested

__uncertain of meaning of concept

15 accompaniment

1 1 1 1 1 1 1 1 1 1 1
not very interested very interested

__uncertain of meaning of concept

16 repertoire

1 1 1 1 1 1 1 1 1 1 1
not very interested very interested

__uncertain of meaning of concept

17 sight singing

1 1 1 1 1 1 1 1 1 1 1
not very interested very interested

__uncertain of meaning of concept

18 ethics

1 1 1 1 1 1 1 1 1 1 1
not very interested very interested

__uncertain of meaning of concept

INTERESTS

19 referral

1__1__1__1__1__1__1__1__1__1__1__1__1
not very interested very interested

__uncertain of meaning of concept

20 music education

1__1__1__1__1__1__1__1__1__1__1__1__1
not very interested very interested

__uncertain of meaning of concept

21 Downs Syndrome

1__1__1__1__1__1__1__1__1__1__1__1__1
not very interested very interested

__uncertain of meaning of concept

22 autism

1__1__1__1__1__1__1__1__1__1__1__1__1
not very interested very interested

__uncertain of meaning of concept

23 intervals

1__1__1__1__1__1__1__1__1__1__1__1__1
not very interested very interested

__uncertain of meaning of concept

24 ostinato

1__1__1__1__1__1__1__1__1__1__1__1__1
not very interested very interested

__uncertain of meaning of concept

25 keyboard

1__1__1__1__1__1__1__1__1__1__1__1__1
not very interested very interested

__uncertain of meaning of concept

26 music in therapy vs. music as therapy

1__1__1__1__1__1__1__1__1__1__1__1__1
not very interested very interested

__uncertain of meaning of concept

2nd Years ONLY:

Sort the 26 interest concepts (from pages 5, 6 & 7) into 3 groups:

i those that are related to your long-term interests, career or personal goals, or hobbies;

ii those that you find interesting or intriguing, but which you do not see as having any long-term value, and

iii those that were not interesting at all, either from a long-term or a short-term viewpoint.

Please write your selection as the number of the concept under i, ii or iii:

i long-term	ii short-term	iii not-interesting

RECALL 1 **DATE:** _____

NAME:_____

Course:_____

Write down all that you can remember of the video example of music therapy.

RECALL TAKE 2 **DATE:** _____

NAME:_____

Course:_____

Write down all that you can remember of the video example of music therapy from last week.

STRATEGIC PROCESSING

Tick any strategy that you used in order to complete the recall task, ie. the video example, according to its usefulness for you. Place an cross (x) next to those strategies that you found *most* useful. For example if you used the musical element of rhythm to assist your recall place either an 'x' beside it .

Possible strategies that you used in your recall (video) task:

1_____comparison of yourself to the music therapist

2_____comparison to other music therapy approaches

3_____judgement of music therapy activity as an appropriate intervention

4_____evaluation of music to facilitate therapy

5_____analysis of music therapy method

6_____remembering colours

7_____looking for movement/s

8_____remembering visual shape/structure of room, seating plan etc.

9_____identifying instruments

10____remembering spoken word/s

11____identifying the musical element of rhythm

12____identifying the musical element of melody/pitch

13____identifying the musical element of form

14____considering the role of each instrument in the music

15____looking for initiations from clients

16____looking for responses from clients

17____looking for interactions between group members

18____looking for interactions between therapist and client

19____considering the voice quality of the clients

20____considering the body language of the clients

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